

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>CHB</i>	<i>412</i>	<i>10/20</i>
O.I.P.E. CLASSIFIER	<i>IN</i>	<i>336</i>	<i>7/24/98</i>
FORMALITY REVIEW	<i>MD</i>	<i>66080</i>	<i>7/28/98</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 (Through numeral) Canceled A Appeal
 Restricted O Objected

Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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